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*the* NATIONAL COMMUNITY  
PHARMACISTS ASSOCIATION

THE VOICE OF COMMUNITY PHARMACY

**Use of Medication Guides to Distribute  
Drug Risk Information to Patients  
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# *National Community Pharmacists Association*

- Founded in 1898 NCPA represents the pharmacist owners, managers, and employees of more than 24,000 independent community pharmacies across the United States
- The nation's independent pharmacies dispense nearly half of the nation's retail prescription medicines
- We share the FDA's interest in making sure that patients utilize medication appropriately and have access to information so they can make informed healthcare decisions

# *FDA Questions for Pharmacy*

- How are pharmacists informed a MedGuide needs to be dispensed?
- How do pharmacists receive MedGuides from manufacturers (e.g., in what format)?
- Challenges in supply...what changes should be made to the Medication Guide program to address these challenges?
- Implementation of electronic distribution (e.g., e-mailed to patients)
- Are MedGuides a valuable tool in counseling patients about drugs with serious risks?
- Should the information be combined or simplified into fewer communication vehicles or do they contain unique information?
- What process improvements could be made to ensure that patients receive appropriate drug risk information at the pharmacy?
- Class MedGuides...advantages/disadvantages

# *MedGuides in Today's Community Pharmacies*

- Required on 60 plus drugs
  - when the NDCs for all distributors' products are tallied, a total of around 9100 require MedGuides....First DataBank current data
- Variable and inconsistent methods to obtain
- Variable readability, length (up to 30 plus pages)
- PDF only
- Patients receive multiple and duplicative types of information (CMI, PPI, PIS)
- Variable methods to inform pharmacist of MedGuide requirement
- Required on new prescription and refills

# *Medication Guide Distribution*

- Inconsistency in how pharmacist is informed to distribute
  - Trade organizations and magazines
  - Computer vendor
  - Drug companies (drug representative)
  - Email notification
  - Colleagues

## *MedGuides From Manufacturers*

- Often manufacturers do not provide pharmacists with MedGuides
- No uniform way to acquire from manufacturers - mechanisms include
  - Tear-off pads with reorder form
  - Attached to the prescription product container (either separate from or buried in prescribing info...but only 1 copy/container)
  - Toll free 800 numbers for pharmacies to order hard copies

# *Challenges Complying With MedGuide Regulation*

- Difficulty incorporating into pharmacy workflow
  - Storage
  - Stopping work flow to download from website
  - Printing on separate printer
- Getting accurate information to distribute....knowing which drugs are required (sheer number of drugs)
- Too much paper for patients
- Pharmacies incur the cost of printing (cost shift to pharmacy from manufacturer)

# *Electronic Distribution of MedGuides*

- Pharmacies would require a good web based program that would interface with the pharmacy management system
- Email is not always practical (retail environment very different)
  - Many patients don't use email
  - Would require an opt-in from patient
  - Increased work flow interruption (beyond normal MedGuide issues due to internet access, changing pharmacy management systems to access patient's email)
- Good or bad depending on where you live
  - Rural internet access a concern
- Electronic format for *manual* printing may cause inconsistent delivery
- If implemented still need availability of *paper* MedGuides



# *Class MedGuides*

- Advantages:
  - Gives an overview about the dangers of all medications in that class and a snapshot of how they work
  - Coalition of manufacturers worked well for NSAIDs and antidepressants giving pharmacy a single point of ordering and consistency in the class MedGuide itself
- Disadvantages:
  - Not all medications are created equal
  - Blanket statements about a class of medications do NOT necessarily mean that it will apply to the one medication from that class that a patient is on and can in some ways, create needless fear in a patient

# *MedGuide Value as a Patient Counseling Tool*

- Difficult to utilize
  - Length and readability
    - Well designed studies on MedGuide effectiveness are needed
    - Reading comprehension of patient versus technical level of the MedGuide
- Patients and caregivers often don't understand them and are sometimes frightened of the “risk” only information
- Patient confusion due to duplicative information (PPI, PIS, CMI)
- MedGuides for refills should be up to pharmacist discretion

# *NCPA MedGuide Recommendations*

- Enforce current FDA MedGuide regulation holding manufacturers accountable for providing:
  - “Medication Guides in sufficient numbers, or the means to produce Medication Guides in sufficient numbers, to permit the authorized dispenser to provide a Medication Guide to each patient who receives a prescription for the drug product”

# *NCPA MedGuide Recommendations*

- Revise MedGuide regulation to:
  - Mandate that product manufacturers create electronic, user friendly, product class MedGuides with access on a NDC based database as well as providing *paper* MedGuides
  - Allow incorporation of MedGuides into pharmacy software...caveat: could increase costs of printing because the printers would use a lot more paper
  - Combine branded and generic MedGuides as one document

# *NCPA MedGuide Recommendations*

- Standard message system needed to inform pharmacists
  - Flag drugs – either on container or through pharmacy management system
- Standard ordering system needed for pharmacy
  - FDA ask manufacturers of like MedGuides to form coalition again
  - Allow CMI vendors to provide MedGuides to pharmacy along with CMI

## *NCPA MedGuide Recommendations*

- MedGuides need to be available in *both* hard copy and electronically so that the pharmacies/software vendors can implement the most appropriate version for their workflow/operations
- Formatting standards must be changed so pharmacies can print MedGuides even if they cannot download a PDF file
- Manufacturers *must* bear the direct and indirect costs of distribution &/or printing by pharmacies

# MedGuide Printing Cost Estimates

## *Current Printing Requirements*

Average Pages in MedGuide (now)	8		Total Pages	2,240,000,000
Total # of Rx requiring MedGuide/yr	<u>280,000,000 *</u>	→	Cost/page	\$0.0401 **
Total # of Pages printed/year	2,240,000,000		<b>Total Annual Cost</b>	<b>\$89,920,000</b>

## *Possible Printing Requirements (if MedGuides 2 pages in length)*

Average Pages in MedGuide	2		Total Pages	560,000,000
Total # of Rx requiring MedGuide/yr	<u>280,000,000 *</u>	→	Cost/page	\$0.0401 **
Total # of Pages printed/year	560,000,000		<b>Total Annual Cost</b>	<b>\$22,480,000</b>

\*Note: Estimated 7% of prescriptions filled require MedGuide.

\*\*Note: Cost/page calculation includes toner cost + paper cost + administrative cost

\*\*\*Note: Cost calculations do not factor in any expense for warranty or cost of an additional printer.

# MedGuide Printing Cost Estimates

## Prices Used in Cost Estimate Calculations

<u>Item</u>	<u>Max Yield (pages)</u>	<u>Price</u>	<u>Source</u>	<u>Cost/page</u>
Lexmark T640 Toner Cartridge	21,000	\$352	OfficeDepot.com	\$0.0168
Paper (5000 sheets/case)		\$50	Staples.com	\$0.01
Administrative Cost*				\$0.0134
<b>Estimated Cost/Page</b>				<b>\$0.0401</b>

## Other Prices to Consider (Not Included in Cost Estimate Calculations)

Lexmark T640DN** Printer	\$1,100	Staples.com
Warranty	\$130-220 Annually	Lexmark

\*Administrative cost applied to cover the expense incurred during acquisition, delivery, and storage of supplies used in printing of Medication Guides. Administrative cost is estimated at 50% of cost/page of toner and paper.

\*\*Lexmark is primary brand printer used in retail pharmacy. Customer service representative identified the T640 model as most common used in pharmacies.





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